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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be the mailed to the current correspondence correspondence of the control of the public of the control of the public of the p

CURRENT CORRESP	ONDENCE ADDRES	S (Note: Use Block 1 for any	change of address)

12/20/2007

Steven I Weisburd Ostrolenk Faber Gerb & Soffen LLP 1180 Avenue of the Americas New YORK, NY 10036-8403

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Slop FSUE, FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2855, on the date indicated helow. (Denositor's name)

			/	(Signature)
				(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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Ţ	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
٠	nonprovisional	NO	\$1440	\$0	\$0	\$1440	03/20/2008	
ſ	EXAM	INER	ART UNIT	CLASS-SUBCLASS	]			
٠	AN, SH	IAWN S	2621	348-076000				
Ī	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56).  ☐ Change of correspondence address (or Change of Correspondence Address form FTO/SB1/22) attached.  "Fee Address" indication (7" Fee Address" Indication form ⟨TO/SB4/7; Rev 0.3-02 or more recent) attached. Use of a Customer Number is required.		(2) the name of a single registered attorney or	3 registered patent attornively, le firm (having as a memb agent) and the names of u	era 2	BER, GERB & SOFFEN,	, LLP	
3	3. ASSIGNEE NAME A	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty				

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

OLYMPUS CORPORATION JAPAN

Please check the appropriate assignee category or categories (will not b	be printed on the patent): 🔲 Individual 🎾 Corporation or other private group entity 🚨 Government
4a. The following fee(s) are submitted:    Mail Issue Fee	4b. Payment of Fee(s). (Please first reapply any previously paid is  A check is enclosed.  Payment by credit card. Form #FF0_2038_is_astasehed.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Depoist Account Number (enclose an extra copy of this form).
<ol> <li>Change in Entity Status (from status indicated above)</li> <li>a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.</li> </ol>	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature	holl	Date	3/17/08
Typed or printed name	nax mos	OWITZ Registration No.	30576

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